

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF LABOR AND TRAINING
DIVISION OF PROFESSIONAL REGULATION

PLUMBERS (RIGL 5-20)

***** INSTRUCTIONS – PLEASE READ CAREFULLY *****

APPLICATIONS WILL NOT BE REVIEWED BY THE DEPARTMENT OF LABOR AND TRAINING
IF THE FOLLOWING DIRECTIONS ARE NOT ADHERED TO

- 1) TWO (2) HEAD AND SHOULDERS PHOTOGRAPHS (PASSPORT TYPE), MUST BE SUBMITTED WITH APPLICATION.
- 2) YOUR APPLICATION MUST BE SIGNED AND NOTARIZED.
- 3) APPLICATION FEE OF \$75.00 FOR MASTER PLUMBER, MASTER IRRIGATOR, AND CONTRACTOR MASTER, IS REQUIRED TO PROCESS YOUR APPLICATION. **THIS IS A NON-REFUNDABLE APPLICATION FEE.** CHECK SHOULD BE MADE PAYABLE TO THE GENERAL TREASURY/STATE OF RHODE ISLAND.
- 3a) APPLICATION FEE OF \$75.00 FOR JOURNEYPerson PLUMBER, AND JOURNEYPerson IRRIGATOR IS REQUIRED TO PROCESS YOUR APPLICATION. THIS IS A NON-REFUNDABLE APPLICATION FEE. CHECK SHOULD BE MADE PAYABLE TO THE GENERAL TREASURY/STATE OF RHODE ISLAND.
- 4) UNDER WORK EXPERIENCE – A SEPARATE, DETAILED, NOTARIZED STATEMENT, ON COMPANY LETTERHEAD, OF ALL WORK RELATED EXPERIENCE, AND OTHER INFORMATION SHOULD BE ATTACHED TO THIS APPLICATION.
*** PLEASE DETAIL YOUR WORK EXPERIENCE THOROUGHLY ***
- 5) All Plumber Master applications require verification of experience in their respective trade for at least five (5) years and must possess a journeyperson's license. Plumber Journeyperson's License must be valid for at least one (1) year prior to the master's test.
- 5a) Master Irrigator, and Journeyperson Irrigator grandfathering see page 4.
- 6) Plumber Journeyperson applications require verification of at least five (5) years experience in their respective trade, and 576 hours of related instruction approved by the Department of Labor and Training.
- 7) The examination to be administered consists of 50 multiple choice questions based on the Rhode Island Edition of the "BOCA International Plumbing Code 2003" (which includes the blue sheets) .

Subject matter covered by the test includes Terminology and Calculations, Materials and Material Standards, Joints and Connections, Traps and Cleanouts, Plumbing Fixtures, Hangers and Supports, Indirect Waste Piping, Water Distribution Systems, Sanitary Drainage Systems, Vents and Venting Systems, Cross Connections, Storm Drains, Related Subjects and Inspecting and Testing.

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF LABOR AND TRAINING
DIVISION OF PROFESSIONAL REGULATION
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www.dlt.state.ri.us

PLUMBERS

*** APPLICATION FOR EXAMINATION AND APPRENTICE CARD ***

APPLICATION MUST BE CLEARLY PRINTED

SOCIAL SECURITY NUMBER

LAST NAME

FIRST NAME

MI

STREET ADDRESS

CITY/TOWN

STATE

ZIP

TELEPHONE

DATE OF BIRTH

EMPLOYER

SELF-EMPLOYED/COMPANY NAME

STREET ADDRESS

CITY/TOWN

STATE

ZIP

EMPLOYER TELEPHONE

CATEGORY – APPLICANTS MUST STATE
WHAT LICENSE IS REQUESTED

LICENSE NUMBER ISSUED BY THIS DIVISION – OR COPY OF YOUR OUT-OF-STATE LICENSE IS REQUIRED.
(IF APPLICABLE)

FOR OFFICE USE ONLY – PLEASE DO NOT WRITE BELOW

TEST FEE PAID, CHECK, CASH, M.O.	DIVISION/COMMISSION APPROVAL FOR TEST
\$ _____	_____
_____	COMMENTS
DATE PAID	_____

Applicant must answer all questions on both pages truthfully and swear to the same before a NOTARY PUBLIC, penalties for false information are as itemized in the General Laws of Rhode Island and Addendum.

Statement may be investigated and verified for truthfulness.

GENERAL LISTING OF WORK HISTORY

NAME OF EMPLOYER	FROM/TO	TYPE OF WORK
_____	_____	_____
_____	_____	_____
_____	_____	_____

EDUCATION

List all education and schooling that you have received in the plumbing trade.

LOCATION	FROM/TO	DEGREE/DIPLOMA
_____	_____	_____
_____	_____	_____
_____	_____	_____

YOU MUST LIST ANY VALID LICENSE YOU NOW HOLD WITH THIS DIVISION AND A COPY OF YOUR OUT-OF-STATE LICENSES.

_____	_____	_____
TYPE OF LICENSE	TYPE OF LICENSE	TYPE OF LICENSE

Listed employer or customer may be sent forms to attest to the truthfulness of all statements on this application and these will have to be sent back to this division, properly notarized, before any action is taken on this licensing test application.

_____	_____	_____
APPLICANT'S SIGNATURE	DATE	NOTARY SEAL

FOR OFFICE USE ONLY

APPROVAL/AUTHORIZATION

If you fail to pass your examination, you may request a review of the same, in writing, to the Division of Professional Regulation, within thirty (30) days of failure notice.

NON-REFUNDABLE PROCESSING APPLICATION FEE

PLUMBERS	COMPUTER CODE	TEST FEE	RENEWAL & LICENSE FEE
Contractor Master	049	\$ 75	\$120
Master Plumber	050	\$ 75	\$ 120
Journeyman Plumber	051	\$ 75	\$ 36
Apprentice Plumber	052		\$ 20
Master Irrigator	53	\$ 75	\$ 120
Journeyman Irrigator	54	\$ 75	\$ 36
Apprentice Irrigator	55	No Test	\$ 20
